

SUMMARY FORM

COLLECTIVE BARGAINING AGREEMENT PUBLIC SECTOR / NON-POLICE & NON-FIRE

Section I: Agreement Details

Public Employer: Atlantic County Special Services Board of Education County: Atlantic
Employee Organization: Atlantic County Special Services Education Association Employees in Unit: 288
Base Year Contract Term: 7/1/2007 6/30/2010 New Contract Term 7/1/2010 6/30/2013
Type of Settlement: ☐ Mediated Settlement ☐ Fact-Finder Recommendation ☒ Voluntary Settlement ☐ Super Conciliation

		Column A Base Year - Total Costs (Last Year of Previous agreement)	Column B New Base Year - Total Costs (First Year of Successor agreement)
Section II: Economic			
Item 1	Salary	\$12,993,815	\$12,993,815
Item 2	Increment		\$390,243
Item 3	Longevity		
Item 4			
Item 5			
Item 6			
Item 7			
Item 8			
Item 9			
Item 10			
Item 11			
Item 12			
Any additional items list on separate sheet Additional Items			
Section III: Totals - Sum of costs in each column		\$12,993,815 (Total)	\$13,384,058 (Total)

Section IV: Analysis of new successor agreement**NEW AGREEMENT ANALYSIS**

Total Base Year (previous agreement)	\$12,993,815					
Effective Date (m/d/yyyy)	7/1/2010	7/1/2011	7/1/2012			
Percent Increase	3%	3%	3%			
Total cost of increase ..	\$390,243	\$401,512	\$413,223			
Total base salary (successor agreement)	\$13,384,058	\$13,785,570	\$14,198,793			

Section V: Impact of Settlement - average annual increase over term of agreement

Percentage Impact (average per year over term of agreement) 3.00
Dollar Impact (average per year over term of agreement) \$1,204,978.00

Section VIHealth Insurance (indicate costs associated on each line)

	Base Year	Year 1				
Cost of Health Plan	\$2,346,083	\$2,580,434				
Employee Contributions	\$0	\$169,110				
Prescription	\$690,498	\$704,708				
Dental	\$163,995	\$170,283				
Vision	\$0	\$0				

The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to punishment.

Section VII

Prepared by: Lisa Mooney Title: Business Administrator
 Date: 5/30/2012
Signature

Certification

I declare to the best of my knowledge and belief that the attached document(s) are true electronic copies of the executed collective negotiations agreement(s) and the included summary is an accurate assessment of the collective bargaining agreement for the term beginning 7/1/2010 thru 6/30/2013.

Employer: Atlantic County Special Services

County: Atlantic

Date: 5/30/2012

Name: Lisa Mooney
Print Name

Title: Business Administrator


Signature